TOTAL

OR

PTC/SB/08 (12-04)
Approved for use through 7/31/2008. OMB 0651-0032
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 O 713601 APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE RATE (\$) FEE (\$) RATE (\$) FEE (\$) (87 OFR 1.18(a), (b), or (c)) SEARCH FEE (87 OFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (87 OFR 1.16(0), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(I)) minus 20 = INDEPENDENT CLAIMS (87 CFR 1.16(h)) OR = Caunim ·x = if the specification and drawings exceed 100 = stieets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) of the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Column 3) SMALL ENTITY OR CLAIMS SMALL ENTITY HIGHES" REMAINING PRESENT NUMBER RATE (\$) AFTER ADDI PREVIOUSLY RATE (\$) EXTRA ADDI-AMENDMENT TIONAL PAID FOR TIONAL FEE (\$) Total (37 CFR 1.16(1) FEE (\$) Minus 20 20 2500 AMENDA 5000 Independent (37 CFR 1.16(h)) Minus OR 3 ×100 = × 2000= Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (\$) AFTER MENDMENT ADDL RATE (\$) PREVIOUSLY ADDL EXTRA ENDMENT TIONAL PAID FOR TIONAL Total (77 CFR 1.166)) FEE (\$) Minus FEE (\$) Independent (37 CFR 1.16(h)) OR Minus Application Size Fee (37 CFR 1.16(s)) OR x FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.16(J)) OR TOTAL ADD'L FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS, ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.